

**Testimony in Support of Senate Bill 2**  
**House Health Policy Committee, September 9, 2014**

Good morning Chairwoman Haines and members of the Health Policy Committee. Thank you for this opportunity to testify in support of Senate Bill 2. My name is Cynthia McCurren, and I am the Dean of the Kirkhof College of Nursing at Grand Valley State University, and the current President of the Michigan Association of Colleges of Nursing- an organization that represents 21 Michigan schools of nursing that educate students at the baccalaureate and graduate level. During the 2012-2013 academic year, Michigan's nursing schools graduated 478 Advanced Practice Registered Nurses. Joining me today is Dr. Kathleen Potempa, Dean of the University of Michigan's School of Nursing.

Our comments today will be directed towards the education and training of Advanced Practice Registered Nurses. Senate Bill 2 would bring Michigan into alignment with national professional nursing standards by defining the role of Advanced Practice Registered Nurses (APRNs) in Michigan's Public Health Code. These definitions are based on the National Council of State Boards of Nursing Consensus Model for APRN Regulation, national standards of APRN practice, and educational preparation. SB 2 would enable Advanced Practice Registered Nurses (APRNs) to practice to the full extent of their advanced education, national certification and competencies.

As educators of APRNs, we take pride in the level of rigor of our educational programs. Our programs prepare APRNs to provide care autonomously to the extent of their education and national certification. We are required to prepare our students to diagnose, treat and prescribe medication to their patients within their scope of practice. National certification exams test graduates ability to make independent decisions. These exams are completed under secure, proctored environments –and certainly a nursing graduate cannot pick up a phone and call a physician in the middle of a board exam to find out if they are on track. Yet, once they pass their board exams, they are expected to practice very differently due to restrictions in this state, a result of inconsistent state regulations that are out of date. Ambiguous laws are often left to interpretation which creates a practice environment with unnecessary barriers to practice and inhibits Michigan from

being a competitive work environment. For these very reasons, some of our nursing graduates are leaving Michigan and going to states where regulation is in alignment with national standards.

Senate Bill 2 WILL NOT expand an APRN's scope of practice. It simply defines their role consistent with their advanced graduate education, training and national certification. Advanced Practice Registered Nurses (APRNs) are a vital part of our health system. They are Registered Nurses (RNs) who hold a Bachelor of Science in Nursing and continue in graduate education, and are nationally certified in a specific role and patient population. APRNs are educated and nationally certified to assess, diagnose, and manage patient problems, order and interpret diagnostic and laboratory tests, and prescribe medications within their scope of practice.

Individuals who are seeking to become an advanced practice registered nurse must have a 4-year Bachelor of Science in Nursing degree completed through a nationally accredited nursing program, hold an active Registered Nurse (RN) license, and typically will have practice experience in a specialty area prior to applying to one of Michigan's APRN graduate degree programs.. Most nurses seeking a graduate nursing degree have at least 5-7 years of experience as a Registered Nurse before applying to graduate nursing school. Once accepted into a specific specialty graduate program, it will take an additional 3-5 years of graduate nursing education specialized on a focus area and role to become an APRN.

APRN education consists of a broad-based health education, including undergraduate didactic and clinical courses and graduate-level courses in advanced physiology/pathophysiology, pharmacology, health assessment, and differential diagnosis, as well as appropriate clinical experiences throughout their undergraduate nursing program and their graduate nursing program. At Grand Valley State University, we prepare APRNs for specialty areas, including pediatrics and geriatrics, two populations in great need of excellence in coordination of efficient care, which APRNs are uniquely qualified to do.

It is very important to know that each APRN graduates from and is national certified in a specific specialty program. For example, if a graduate nursing student wants to take care of sick neonates in a Neonatal Intensive Care Unit, he or she

would go into a Neonatal Nurse Practitioner Program. If after several years he/she wants to take care of children instead, they would have to enroll in another graduate program and pass an additional national certification exam to become a Pediatric Nurse Practitioner. You see, graduate nursing education is unique because we do not assume that one nursing graduate degree confers the ability to practice in any other population foci area.

There is also a national call to focus on “patient-centered care.” The patient-centered nature of APRN training, which often includes care coordination and sensitivity to the social and cultural factors that impact health, makes APRN’s particularly well prepared for and interested in providing primary care.

The simple step of updating the Michigan Public Health Code will help Michigan move toward a healthier state. Nurse Practitioners, Nurse-Midwives, and Clinical Nurse Specialists are essential in the process of decreasing health care costs, in increasing access and in the delivery of quality health care. The need for these primary care providers is critical to the health of our state.

This legislation will not change the established practice of consultation with physicians or referral to specialty physicians for patients with more complex issues or whose care is outside of APRN scope of practice. APRNs, like all health care professionals, have a legal and ethical obligation to consult and refer patients to specialists when needed. APRNs will continue to remain an integral part of the patient-centered care team. Nurses believe the best care comes from a patient-centered team. SB2 promotes team-based care by allowing APRNs to become more effective team members, provide prevention and wellness services, care coordination, and quality assurance –all of which lead to better patient outcomes.

In closing, as Dean’s and educators, we urge you to support SB 2. Legal authority in Michigan’s Public Health Code should reflect what is already occurring in practice every day. Regulatory barriers that prohibit APRNS from practicing to their full extent of their education and national certification should be removed.

Thank you for the opportunity to speak, I would now like to turn it over to my colleague Dr. Potempa.